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007265 7590 10/29/2004

MICHAELSON AND VITALE ASSOCIATES  
 PARKWAY 109 OFFICE CENTER  
 328 NEWMAN SPRINGS RD  
 P O BOX 8489  
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<u>Peter L. Michaelson</u>	(Name)
<u>Peter L. Michaelson</u>	(Signature)
<u>March 25, 2005</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/641,407	08/17/2000	Hamish D.S. Martin	3COM-76 (3106NMDUSP)	4674

TITLE OF INVENTION: METHOD AND APPARATUS FOR THE IDENTIFICATION OF SERVERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	<del>\$1378</del> \$1400	\$0	<del>\$1378</del> \$1400	01/31/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LUU, LE HIEN	2141	709-223000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Michaelson & Associates2 Peter L. Michaelson3 Alberta A. Vitale

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

3COM CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SANTA CLARA, CALIFORNIA

03/29/2005 BABRAHA2 00000097 09641407

02 FC:1501

1400.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-3083 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Peter L. Michaelson

Date

March 25, 2005Typed or printed name Peter L. MichaelsonRegistration No. 30,090

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